	- <b>F</b>
TORNEY OR PARTY WITHOUT ATTORNEY (NAME AND ADDRESS): TELEPHONE: CONTOS & BUNCH (818) 716-9400	FOR COURT USE ONLY
ONTOS & BUNCH (818) 716-9400 855 Topanga Canyon Boulevard, Suite 400	
Voodland Hills, CA 91367	
TORNEY FOR (NAME): Defendant GERALD ARMSTRONG	· · · · · · · · · · · · · · · · · · ·
ert name of court, judicial district or branch court, if any, and post office and street address:	-
UPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES	
11 North Hill Street	
os Angeles, CA 90012	
AINTIFF: HURCH OF SCIENTOLOGY OF CALIFORNIA, et al.,	
california, et al.,	
FENDANT: ERALD ARMSTRONG, et al.,	
	CASE NUMBER:
IVIL SUBPENA XXX COURT DEPOSITION	C 429 k53
DUCES TECUM OTHER (specify):	C 429 K55
THE PEOPLE OF THE STATE OF CALIFORNIA, TO (NAME): LAUREL SULLIVAN	
THORE SOLLIVAN	
1. YOU ARE ORDERED TO APPEAR AS A WITNESS in this action as follows unles	S VOU make a special agreement
with the person named in item 3:	s you make a special agreement
a. Date: April 16, 1984 Time: 9:00 A.M. XX Dept.: 1	Div.: Room:
	90012
2. and you are	
a. XXX ordered to appear in person.	
b not required to appear in person if you produce the records described	in the accompanying affidavit in
compliance with Evidence Code sections 1560 and 1561.	
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1. I served this subpena subpena duces tecum and supporting affidavit by delivering a copy personally to the person served as follows:

a. Person served (name):

b. Address where served:

c. Date of delivery:

d. Time of delivery:

e. Witness fees (check one)

(1) were offered or demanded and paid. Amount. . . . \$ \_\_

(2) were not demanded or paid.

2. I received this subpena for service on (date):

3. Person serving

a. 🔄 Not a registered California process server.

b. 🔄 Registered California process server.

c. Employee or independent contractor of a registered California process server.
 , d. Exempt from registration under

Bus. & Prof. Code section 22350(b).

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct and that this declaration is executed on (date):

(Signature)

e. California sheriff, marshal, or constable.
f. Name, address and telephone number and if applicable, county of registration and number: 1

(For California sheriff, marshal, or constable use only): I certify that the foregoing is true and correct and that this certificate is executed on (date): at (place):

(Signature)